## **Independent Citizens Redistricting Commission**

Application Review and Quality Control Sheet

		:		
Applicant Name	Ruth	Caspez		
		pplicant Number:	10324	
Date Received:	-/V/19 A	pplicant Number:	00	
Recommended Applicant Pool Status: Final Applicant Pool Status:				
Included	Removed	☐Included	Removed	
REQUIREMENTS:				
1. Was the applica	ation received before the submi	ssion deadline?	✓Yes □No	
If NO, list time/date application was received:				
2. Is the application	on complete?		Yes No	
If NO, list the item(s) that need to be completed:				
3. Indicate how the applicant responded to the following questions:				
A. Student enrolled in a college/university in the City of Austin?				
If YES, consider I and ii only; If NO, consider I, ii, iii, and iv:				
i. Res	ide in the City of Austin?		Øyes □No	
ii. Reg	istered to vote in the City of Au	stin?	☐Yes ☐No	
iii. <b>Co</b> r	ntinuously registered to vote in	the City of Austin?	∑Yes □No	
iv. Vot	ted in 3 of the last 5 City of Aust	în general elections?	☑Yes ☐No	
	led related to REQUIREMENTS?  tify issue(s) addressed and dispos	history Left	ØYes □No	
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Application	
CONFLICTS OF INTEREST:  4. Did the applicant respond "Yes" to any configuration of the second of the	onflict of interest questions?
Follow-up needed related to CONFLICTS  If YES, identify issue(s) addressed and	OF INTEREST?  I disposition:
CONSISTENCY:  5. Are applicant answers consistent?  If NO, indicate which answer(s):	☐Yes ☐No
Follow-up needed related to CONSISTI If YES, identify issue(s) addressed a	ENCY?  Ind disposition:
B	Review Date: 2/22/13
Application Reviewed By:  Quality Control Review By:  Follow-up Contact(s) Reviewed By:	QC Review Date: 3/1/13  Date: 3/1/13